

FORTY-THIRD
ANNUAL REPORT

— OF THE —

Bourne Rural District,

FOR THE YEAR 1915

— BY —

JOHN GALLELY,

M.A.; M.B., C.M. (Edin.),

D.P.H. (Cambridge),

MEDICAL OFFICER OF HEALTH;

— AND —

JOHN ROSS,

Cert. Royal San. Inst.,

INSPECTOR OF NUISANCES.

Bourne:

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TO THE BOURNE RURAL DISTRICT COUNCIL.

GENTLEMEN.

The Local Government Board have suggested that the Annual Reports of Medical Officers of Health be considerably curtailed this year, and with this suggestion I willingly comply. The times are too serious, and the necessity for economy—public as well as private—too pressing to warrant communities spending more money than is absolutely necessary to insure the health of the public. In the past our Council has deservedly earned a reputation for a progressive spirit in matters of public health, and it is with great reluctance, I feel sure, that some of our Schemes have had to be abandoned for the time being at least.

In the following Report, therefore, you will find only a brief commentary on the Sanitary works that have been executed in this District during 1915.

WATER SUPPLY.

The scheme for supplying Baston with water from an Artesian Well had to be postponed owing to the refusal of the Local Government Board to grant a loan for this purpose. This refusal shows the necessity for public economy in the opinion of the Government, as a public enquiry had been held at Baston by one of the Local Government Board Officials, at which the proposed Scheme, with a few minor alterations, was approved. The proposed new water-supply for Castle Bytham has made no progress owing to the difficulty of making satisfactory arrangements with the owners of the present water-supply.

During the past year 3 Artesian bores have been made,—2 at Horbling and 1 at Billingborough.

RIVERS AND STREAMS.

I am sorry to say the pollution of the river Glen at Corby has once more become a question of some urgency, as the make-shift arrangement, effected in 1913, has proved unsatisfactory to the occupier of the land adjoining the present outlet of the Sewer. The only satisfactory solution of this problem is to treat the Sewage by means of septic tanks and filter beds before it is allowed to enter the river. Unfortunately this costs money. Pollution of the river Welland at Market Deeping and Deeping St. James still goes on.

DRAINAGE AND SEWAGE.

A new Sewer, consisting of 430 yards of 6-inch pipes and 150 yards of 4-inch pipes, has been constructed at Swayfield.

The ditch at Brewery Lane, Billingborough, has been piped with 9-inch Stoneware pipes for a distance of 170 yards.

The Sewer Culvert at Pointon has been extended 35 yards. The Invert at Rippingale was repaired and extended. Thirty-nine House Drains have been reconstructed, and 115 new House Drains have been inserted.

The Sewer outfalls at Thurlby and Horsegate (Deeping St. James) still give rise to nuisances.

CLOSET ACCOMMODATION.

Much less discussion, I am pleased to say, has taken place on the rival merits of Midden Privies, Privy Ashpits, and Pan Closets. As in previous years we continue to increase the number of Pan Closets and to diminish the number of Midden Privies. The actual figures are :—

Old Midden Privies repaired	...	...	...	...	9
Old Midden Privies converted into Water Closets	...	...	...	...	3
Old Midden Privies converted into Pan Closets	...	...	...	...	30
New Pan Closets constructed	...	...	...	...	27

SCAVENGING.

No attempt has been made to deal with this matter.

SANITARY INSPECTION OF THE DISTRICT.

The house-to-house inspection of the District has gone on as usual, although, perhaps, not with the same keenness, as it is understood that only the most necessary improvements would be insisted on by your Council.

The number of dwelling-houses inspected under and for the purposes of Section 17 of the Act of 1909	23
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The number of dwelling-houses which, on inspection, were considered to be in a state so dangerous or injurious to health as to be unfit for human habitation	7
--	-----	-----	-----	-----	---

The number of representations made to the local authority with a view to the making of closing orders	11
---	-----	-----	-----	-----	----

The number of closing orders made	7
-----------------------------------	-----	-----	-----	-----	---

The number of dwelling-houses the defects in which were remedied without the making of closing orders	146
---	-----	-----	-----	-----	-----

The number of dwelling-houses which, after the making of closing orders, were put into a fit state for human habitation	—
---	-----	-----	-----	-----	---

The usual defects found were defective roofs and floors, damp walls, pantries with neither light nor ventilation, bedrooms with insufficient light and ventilation, defective spouting, yard paving and drains, insanitary privies, and polluted wells.

SCHOOLS.

The School at Irnham was closed for Scarlet Fever; the Schools at Billingborough and Dowsby, for Whooping Cough; at Thurlby, for Mumps; at Deeping St. James, for Measles; and at Witham-on-the-Hill, for Chicken Pox.

At Irnham School the Privy Vaults were abolished and Pan Closets substituted, and a new Urinal constructed; new Drains were also inserted.

At Dowshy School a new Drain for the Urinal was inserted, and at Thurlby School a new Gulley was fixed for the Urinal. At Castle Bytham School new Drains were inserted, and the old Cesspool abolished.

At Aslackby School and at the Infants' School at Deeping St. James the Closet accommodation is still unsatisfactory.

Medical inspection of the School children in this District has gone on much as usual, although the School Medical Officer (Dr. Lowe) has been serving his Country for part of 1915 as a Captain in the R.A.M.C. In the absence of Dr. Lowe the work of Medical Inspection has been carried out by Dr. Ewan, of Sleaford.

FOOD.

(A) MILK SUPPLY.—Very little has been done during the past year to improve the Cowsheds of the District. This is one of the matters that will have to be taken up with increased energy when peace happily returns.

(B) OTHER FOODS.—The visits of your Inspector to the various Slaughter Houses resulted in the detection and destruction of 30 stone of tuberculous beef, 1 case of tuberculous lungs and 1 tuberculous head, besides 5 cystic livers, 6 stone of diseased veal and 15 stone of unsound mutton.

The Bakehouses of the District are regularly inspected, and are usually found very clean.

(C) SALE OF FOOD AND DRUGS ACTS.—No proceedings under these Acts have been taken during 1915.

HOUSING.

The increased cost of building materials and the urgent need for economy have put a stop, for the time being, to the erection of more Council Houses in this District, although 4 Council Houses at Castle Bytham were built in 1915, as the loan for these had already been sanctioned.

In addition to the above, 6 Houses have been built by private owners, viz., 2 in Grimsthorpe, 1 in Dowshy Fen, 1 in Market Deeping, 1 in Deeping St. James, and 1 in Rippingale.

One House has been demolished in 1915.

Overcrowding occurred in several cases.

SANITARY ADMINISTRATION OF THE DISTRICT.

I.—STAFF. The war has made no change yet in our Staff, as we have still our energetic Sanitary Inspector, as will be seen from his comprehensive Report.

No Health Visitor was at work in this District in 1915, but a highly qualified lady has quite recently been appointed to act in this capacity.

2.—HOSPITAL ACCOMMODATION AVAILABLE FOR INFECTIOUS DISEASES. I am pleased to say our Isolation Hospital, which was described in my last Annual Report, was formally opened on 2nd June, 1915, by the Countess of Ancaster, in the presence of the Members of the Bourne Urban and Bourne Rural Councils, and their Officials and friends.

The first patient was admitted on 10th June, and from that date till now some of the wards have been in constant occupation. It was inspected by one of the Local Government Board Medical Inspectors, and pronounced to be one of the best, for its size, he had seen.

It has been a great disappointment to me that the Tuberculosis Pavilion, contained in the original Scheme, has not been built, as this would have been a source of revenue to our Hospital, besides fulfilling a much needed want. At the present time, however, we are told every penny is wanted for the war, so our Schemes must wait.

3.—ADMINISTRATION OF LOCAL ACTS OR GENERAL ADOPTIVE ACTS. The Midwives Act, 1902, is under the supervision of the County Council.

The Notification of Births (Extension) Act, 1915, came into force in this District on 1st September, 1915. This Act makes the provisions of the Notification of Births Act, 1907, apply to every District in the Country.

4.—CHEMICAL AND BACTERIOLOGICAL WORK. One sample of water was analysed by the Clinical Research Association, and found to be liable to pollution. Two samples of water were analysed by your Medical Officer of Health,—one was found to be of fair quality, and the other bad. All these samples were from surface wells. The bad result obtained by your Medical Officer in one of the samples analysed by him was the means of an Artesian bore being made at that place (Sempringham Fen) and a good supply of pure water being obtained.

Swabs from cases of suspected Diphtheria, and Sputa from cases of Tuberculosis have been frequently sent to the Clinical Research Association for bacteriological examination at the expense of the Council.

MEANS FOR PREVENTING MORTALITY IN CHILDBIRTH AND IN INFANCY.

The Mortality in Childbirth and in Infancy in this District is comparatively low, but with the introduction of the Notification of Births Act into this District, and the appointment of a lady Health Visitor, we may confidently look for a still lower Mortality in the near future.

The diminishing birthrate throughout the Country generally has made the necessity of conserving the infantile population all the more urgent.

VITAL STATISTICS OF THE DISTRICT.

Table I gives the Vital Statistics for the whole of the Bourne Rural District for the year 1915 and the five previous years.

The number of births in 1915 was 281, being exactly the same as in 1914, but as the estimated population was smaller in 1915 this gives a birth rate of 21.9 instead of 20.6 in 1914.

The number of deaths in 1915 belonging to this District amounts to 186, being an increase of 19 over that of 1914. This is equivalent to a death rate of 14.5.

The number of deaths of children under 1 year is 21 being 4 fewer than in 1914; the Infantile death rate is therefore 74.7, compared with 110 for the whole Country. This speaks well for the Mothers in the Bourne Rural District.

Table II gives the cases of Infectious disease notified during 1915.

The total number notified was 54, being an increase of 3 over the figures for 1914. The numbers for each Disease are as follows :—

Diphtheria 4, Erysipelas 4, Scarlet Fever 18, Puerperal Fever 1, Ophthalmia Neonatorum 1, Pulmonary Tuberculosis 18, other forms of Tuberculosis 8.

There were 21 deaths amongst these cases, but with the exception of 1 death from Puerperal Fever, all the deaths occurred amongst the various forms of Tuberculosis. This is a large increase in the number of deaths from Tuberculosis as compared with 1914, when the number was only 7. We may try to console ourselves with the reflection that we were not so bad as in 1912, when the number of deaths from Tuberculosis was 22. As in 1914, there were again no deaths from Scarlet Fever, Diphtheria or Enteric Fever.

The 4 Diphtheria cases were all isolated cases, viz., 1 in Market Deeping, 1 in Langtoft, 1 in Thurlby, and 1 in Corby. They were all removed to Hospital.

The 18 cases of Scarlet Fever were distributed thus : 2 in Rippingale, 1 in Morton, 4 in Thurlby, 3 in Baston, 7 in Irnham, and 1 in Corby. With one exception they were all removed to Hospital.

The case of Puerperal Fever occurred at Baston, and unfortunately proved fatal.

The 26 cases of Tuberculosis were very unevenly distributed, as 9 occurred in the Deeping District, 11 in the Aslackby District, 4 in the Bourne District, and 2 in the Corby District. This corresponds with previous years' results, viz., most cases occur in the lowlying districts.

Table III gives the causes and ages at Death during 1915. Organic Heart Disease heads the list with 24 deaths, of which 16 occur in people over 65 years.

Bronchitis comes second with 22 deaths and of these 15 occur in persons over 65 years.

Tuberculosis (Pulmonary and other forms) accounts for 20 deaths, in only 1 of which is the age over 65 years. The dis-

tribution of these deaths in the Sub-Districts accentuates the difference mentioned under Table II, viz., 11 in the Deeping District, 4 in the Aslackby District, 3 in the Bourne District, and 2 in the Corby District. If we have regard to the relative populations of these Districts the number of deaths in the Deeping District should be 2.5 instead of 11, if its record were to equal that of the Corby District. These figures show the necessity for dealing more energetically with Tuberculosis cases in the future if we expect to reduce both the incidence and the mortality of this scourge.

Pneumonia (all forms) caused 15 deaths, compared with 14 deaths in 1914.

Cancer was the cause of 10 deaths, compared with 18 deaths in 1914,—a most gratifying decrease for which, unfortunately, I am unable to account.

Here again the distribution shows a preference of the disease for the Aslackby and Deeping Districts, viz., 4 in the Aslackby District, 3 in the Deeping District, 2 in the Bourne District, and 1 in the Corby District. The figures for the last 9 years are even more impressive, viz., 49 in the Aslackby District, 53 in the Deeping District, 32 in the Bourne District, and 18 in the Corby District. If the Deeping District were as immune from Cancer as the Corby District the number of deaths, having regard to the respective populations, would have been 23 instead of 53. Some influence must be at work to cause such a marked difference in the mortality from this disease in these 2 Districts. Until the true cause of Cancer has been established we shall probably look in vain for an explanation of the above figures.

Diarrhoea and Enteritis caused 8 deaths, 1 more than in 1914.

Influenza caused 6 deaths, Nephritis 4 deaths, Appendicitis 3 deaths, Measles 2 deaths. Accidents and Diseases (excluding Puerperal Fever) of Pregnancy and Parturition 2 deaths, Puerperal Fever 1 death, Cirrhosis of Liver 1 death, Suicide 1 death, other violent deaths 6, an increase of 5 compared with 1914.

The Zymotic death rate was 0.78 compared with 0.51 in 1914.

Table IV gives the Infantile Mortality in 1915.

The number of deaths in children under 1 year was 21, 4 less than in 1914. This gives an Infantile death rate of 74.7.

Convulsions and Bronchitis each caused 4 deaths; Pneumonia (all forms) 3 deaths; Measles, Gastritis, Atelectasis and Congenital Malformations each 1 death, whereas 6 deaths are attributed to Premature birth.

On the whole these Tables are of a satisfactory nature.

I remain, Gentlemen,

Your obedient Servant,

JOHN GALLETY,

Medical Officer of Health.

BOURNE, 19TH APRIL, 1916.

Bourne Rural District Council.

REPORT OF THE INSPECTOR OF NUISANCES,

For the Year Ending 31st December, 1915.

TO THE CHAIRMAN AND MEMBERS OF THE BOURNE RURAL DISTRICT COUNCIL.

GENTLEMEN,

I have pleasure in submitting for your information and consideration my Fourth Annual Report, which is in tabulated form for the purpose of brevity and economy; nevertheless, the Report reveals that during the year, in spite of the terrible war cloud which has unfortunately overshadowed our Country and checked some of the works which were decided upon, a great amount of work has been done, which will enable your Council to report progress in Sanitation, and will prove an improvement to your District.

Letters and Notices served (Notices. 18) ...	...	...	...	276
Dwelling-houses unfit for habitation closed	...	...	...	7
" ,, cleansed	...	...	...	1
" ,, overcrowded dealt with	...	...	...	3
Number of Old Midden Privies repaired	...	...	...	9
" ,, ,, converted into Water Closets	...	...	...	3
" ,, ,, converted into Pail Closets	...	...	...	30
" New Pail Closets constructed	...	...	...	27
" Drains reconstructed	...	...	...	39
" New Drains constructed	...	...	...	115
" Cesspools constructed	...	...	...	3
" Cesspools abolished	...	...	...	2
" Wells cleansed	...	...	...	1
" Wells repaired	...	...	...	4
" Pumps erected	...	...	...	2
" Offensive Accumulations removed	...	...	...	99
" Cowsheds, Stables, and Pigstytes repaired	...	...	...	4
Petrol and Carbide Stores (visits thereto 30)	...	...	...	37
Slaughter-houses (visits thereto 203)	...	...	...	28
Cowsheds and Dairies (visits thereto 176)	...	...	...	41
Workshops, etc. (visits thereto 265)	...	...	...	154
Houses for work done	...	...	...	146
Number of House Roofs renewed and repaired	...	...	...	44
" House Floors renewed and repaired	...	...	...	86
" House Stairs renewed and repaired	...	...	...	8
" House ceilings renewed (repaired 6)	...	...	...	36
" House Doors renewed and repaired	...	...	...	11
" Rooms plastered	...	...	...	52
" provided with light and ventilation	...	...	...	114
" provided with eaves, gutters, and spouting	...	...	...	13
" of Inspection Chambers built	...	...	...	31
" Yards paved	...	...	...	27

Number of Houses disinfected ...	...	...	...	...	27
" Vent. Shafts and Fresh Air inlets inserted	...	...	...	...	29
" New Coal-houses built	...	...	...	...	2
" New Pantries built ...	...	...	...	...	8
" Pantries ventilated ...	...	...	...	...	14
" Slaughter-houses repaired	...	...	...	...	1
" New Septic Tank and Filters inserted	...	...	...	...	4
" New Bedrooms provided	...	...	...	...	2
" New Bathrooms provided	...	...	...	...	1
" New Living Rooms provided	...	...	...	...	2
" New Kitchens provided	...	...	...	...	1
" New Filters built ...	...	...	...	...	2
" New Sinks provided ...	...	...	...	...	5
" New Sink Wastes provided	...	...	...	...	2
" Bakehouses abolished	...	...	...	...	1
" New Water Bores inserted	...	...	...	...	2
" Chimneys renewed and repaired	...	...	...	...	7
" New disconnecting Chambers ...	...	...	...	...	2
" New Urinals built ...	...	...	...	...	2
" New Water Closets inserted ...	...	...	...	...	4
" New Baths inserted ...	...	...	...	...	1
" Ashpits repaired	...	...	...	...	2
" Walls repaired and Grates fixed	...	...	...	...	12
" Houses supplied with Tap Water supply	...	...	...	...	6
" New Petrol Stores constructed	...	...	...	...	2
" Soft Water Tanks built	...	...	...	...	1
" Washhouses and Pantries repaired	...	...	...	...	2
" Washhouses newly built	...	...	...	...	5
" House Certificates granted	...	...	...	...	3
" House-to-House Inspection made under Housing and Town Planning Act, 1909	...	...	...	...	23
" Houses demolished under the above Act	...	...	...	...	1
" Inspections on occurrence of Infectious Disease	...	...	...	...	36
" Appointments with Owners and Agents	...	...	...	...	103
" Works in progress, Inspections	...	...	...	...	359
" Schools inspected	...	...	...	...	47
" House Inspections	...	...	...	...	867
Total number of Inspections made	...	...	...	...	2406
" " Nuisances abated :—					
" " House Nuisances abated	...	...	...	754	
" " Contraventions of Regulations remedied	...	...	...	43	
					797

MEAT DESTROYED DURING THE YEAR.

- 30 Stone of Tuberculous Beef
- 6 Stone of Veal, suffering with Pyaemia
- 15 Stone of Unsound Mutton
- 5 Livers (Cystic)
- 1 Lungs, Tuberculous
- 1 Head suffering from Tuberculosis

In conclusion, I desire to thank the Council, Medical Officer of Health, and all other Officials, for their courtesy and support in the performance of my duties.

I have the honour to be,

Your obedient Servant,

JOHN ROSS,

FEB. 17TH, 1916.

Inspector.

TABLE I.

Vital Statistics of Whole District during 1915 and previous Years.

Bronze Burial

Name of District

YEAR.	Population estimated to middle of each Year.	Births.		TOTAL DEATHS REGISTERED IN THE DISTRICT.			TRANSFERABLE DEATHS. [#]			NETT DEATHS BELONGING TO THE DISTRICT.		
		Nett.		Number. †	Rate. Number. †	Rate. Number. *	of Non-residents registered in the District. †	of Residents not registered in the District. †	Under 1 Year of Age. Number. *	Rate per 1,000 Nett Births. Number. *	At all Ages. Number. 12	
		Un-corrected Number. 3	Corrected Number. 4									
1910.	12,118	343	28.3	169	13.9	23	28	81.6	192	15.6		
1911.	13,391	344	23.5	191	14.2	19	33	104.4	210	15.6		
1912.	13,500	293	21.4	168	12.4	13	21	70.9	181	13.4		
1913.	13,550	325	330	24.3	168	12.3	3	21	25	75.7	186	13.7
1914.	13,600	280	281	20.6	140	10.2	27	25	89.0	167	12.2	
1915.	12,774	281	281	21.9	165	12.9	21	21	74.7	186	14.5	

NOTES.—This Table is arranged to show the gross births and deaths registered in the district during the calendar year, and the births and deaths properly belonging to it with the corresponding rates. The rates should be calculated per 1000 of the estimated gross population as stated in Col. 2, without the use of the standardising factor for the district given in the Annual Report of the Registrar-General. In a district in which large Public Institutions for the sick or infirm seriously affect the statistics, the rates in Columns 5 and 13 may be calculated on a nett population, obtained by deducting from the estimated gross population the average number of inmates not belonging to the district in such institutions.

*In Column 6 are to be included the whole of the deaths registered during the calendar year as having actually occurred within the district, but excluding the deaths of Soldiers and Sailors that have occurred in hospitals and institutions in the district. Information as to the number and causes of such deaths should, however, be given in the text of the report.

In Column 12 is to be entered the number in Column 6, corrected by subtraction of the number in Column 8 and by addition of the number in Column 9. Deaths in Column 10 are to be similarly corrected by subtraction of the deaths under 1, included in the number given in Column 8, and by addition of the deaths under 1 included in the number given in Column 9.

† The Medical Officer of Health will be able from the returns made to him by the local Registrar of Deaths, as well as from the quarterly lists furnished by the Registrar-General, to fill in Column 8 in accordance with the rule in the next paragraph below. The Registrar-General, either directly or through the County Medical Officer of Health will supply the Medical Officer of Health with the particulars of deaths to be entered in Column 9; and all such deaths must be included in this Column, unless an error is detected, and its correction has been accepted by the Registrar-General. For Column 4 the Registrar-General will furnish about the end of January to the Medical Officer of Health a Statement of the number of births needing to be added to or subtracted from the total supplied by the local Registrar.

‡ "Transferable Deaths" are deaths of persons who, having a fixed or usual residence in England or Wales, die in a district other than that in which they resided. The deaths of persons without fixed or usual residence, e.g., casuals, must not be included in Columns 8 or 9, except in certain instances under 3 (b) below. The Medical Officer of Health will state in Column 8 the number of transferable deaths of "non-residents" which are to be deducted, and will state in Column 9 the number of deaths of "residents" registered outside the district which are to be added in calculating the nett death-rate of his district.

The following special cases arise as to Transferable Deaths:—

- (1) Persons dying in Institutions for the sick or infirm, such as hospitals, lunatic asylums, workhouses, and nursing homes (but not almshouses) must be regarded as residents of the district in which they had a fixed or usual residence at the time of admission. If the person dying in an Institution had no fixed residence at the time of admission, the death is not transferable. If the patient has been directly transferred from one such Institution to another, the death is transferable to the district of residence at the time of admission to the first Institution.
- (2) The deaths of infants born and dying within a year of birth in an Institution to which the mother was admitted for her confinement should be referred to the district of fixed or usual residence of the parent.
- (3) Deaths from Violence are to be referred (a) to the district of residence, under the general rule; (b) if this district is unknown, or the deceased had no fixed abode, to the district where the accident occurred, if known; (c) failing this, to the district where death occurred, if known; and (d) failing this, to the district where the body was found.

Total population at all ages 13,391

Total families or separate occupiers 3,148

(Figures given in Census special volume for the County, also in Vols. I, VI, VII,

and VIII of the reports of the Census of England and Wales.)

At Census,
1911.

At Census,
1911.

Cases of Infectious Disease notified during the year 1915.

TOTAL CASES NOTIFIED IN EACH LOCALITY
NUMBER OF CASES NOTIFIED.
(e.g. Parish or Ward) of the District.

NOTIFIABLE DISEASE. REMOVED TO HOSPITAL.	TOTAL CASES NOTIFIED IN EACH LOCALITY.	At All AGES.							At All Ages.						
		Under 1. and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 and under upwards.	Asturky Bumc Ctry Debris	Under 1. and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 and under upwards.	
Small-pox	4	3	4	2	1	1	1	1	1	1	1	1	1	1	1
Diphtheria (Including Membranous Group)	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Cholera (C) Plague (P)	17	3	12	2	2	5	5	2	1	1	1	1	1	1	1
Typhus fever	4	4	4	2	1	1	1	1	1	1	1	1	1	1	1
Scarlet fever	17	3	12	2	2	5	5	2	1	1	1	1	1	1	1
Enteric fever	4	4	4	2	1	1	1	1	1	1	1	1	1	1	1
Puerperal fever	4	4	4	2	1	1	1	1	1	1	1	1	1	1	1
Contiguous fever (C)	4	4	4	2	1	1	1	1	1	1	1	1	1	1	1
Thelapsing fever (R)	4	4	4	2	1	1	1	1	1	1	1	1	1	1	1
Cerebro-spinal Meningitis	4	4	4	2	1	1	1	1	1	1	1	1	1	1	1
Poliomyelitis	4	4	4	2	1	1	1	1	1	1	1	1	1	1	1
Ophthalmitis Neonatorum	4	4	4	2	1	1	1	1	1	1	1	1	1	1	1
Pulmonary Tuberculosis	4	4	4	2	1	1	1	1	1	1	1	1	1	1	1
Other forms of Tuberculosis	4	4	4	2	1	1	1	1	1	1	1	1	1	1	1

Notes.—State in space below the name and position within or without the district of the isolation hospital, sanatoria or other institutions to which the residents in the district suffering from infectious disease, have usually been sent, and the name of the authority by whom the hospital is provided.

† These age columns for notifications should be filled up in all cases where the Medical Officer of Health, by inquiry or otherwise, has obtained the necessary information.

‡ Specifically the disease by initial against the figure.

* The figures should take account of any correction of error in notification or revision of diagnosis as a result of the further course of the disease (cf. para (3) on P. 3 of the Weekly Summary of Cases of Infectious Diseases). Cases of infectious diseases occurring among soldiers or sailors should not be included in this Table, but a separate statement as to the Weekly Summary of Cases of Infectious Diseases).

These, when known, should be given in the body of the Report.

TABLE III.
Deaths registered during the Calendar Year 1915 classified by age and cause.
Name of District *Bonne Rural*

(See Notes at Back.)

CAUSES OF DEATH.	NETT DEATHS AT THE SUBJOINED AGES OF "RESIDENTS" WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT (a.)						TOTAL DEATHS WHETHER OF "RESIDENTS" OR "NON-RESIDENTS" IN INSTITUTIONS IN THE DISTRICT (b).			
	All ages.	Under 1 year.	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.				
1	2	3	4	5	6	7	8	9	10	11
All causes	Certified (c)	184	21	2	6	8	6	25	33	83
All causes	Uncertified	2						2		
1. Enteric Fever	...									
2. Small-pox	...									
3. Measles	...									
4. Scarlet Fever	...									
5. Whooping Cough	...									
6. Diphtheria and Croup	...									
7. Influenza	...									
8. Erysipelas	...									
9. Phthisis (Pulmonary Tuberculosis)	15									
10. Tuberculous Meningitis	2									
11. Other Tuberculous Diseases	3									
12. Cancer, malignant disease	10									
13. Rheumatic Fever	...									
14. Meningitis (See note (d))	...									
15. Organic Heart Disease	...	24								
16. Bronchitis	...	22	4							
17. Pneumonia (all forms)	...	15	3							
18. Other diseases of respiratory organs	...	1	2							
19. Diarrhoea and Enteritis. (See note (e))	...	8	3							
20. Appendicitis and Typhilitis	...									
21. Cirrhosis of Liver	...									
21a. Alcoholism.	...									
22. Nephritis & Bright's Disease	...									
23. Puerperal Fever	...									
24. Other accidents and diseases of Pregnancy and Parturition	...									
25. Congenital Debility and Malformation, including Premature Birth	...									
26. Violent Deaths, excluding Suicide	...									
27. Suicide	...									
28. Other Defined Diseases	...	37	4							
29. Diseases ill-defined or unknown	...		15							
Totals		186	21	2	6	8	6	25	35	83
Sub-Entries included in above figures.	14(a). Cerebro-spinal Meningitis ... 28(a). Poliomyelitis *									

* Sub-Entries should here be made for other deaths which it is desirable to distinguish, on account of their administrative importance or special interest (e.g., any deaths from Anthrax, Typhus or Glanders, which have been included under 23, *Other Defined Diseases*; or deaths from pneumonia other than broncho-pneumonia which have been included under 17, *Pneumonia all forms*).

NOTES TO TABLE III.

The classification and numbering of Causes of Death are those of the "Short List" on page XXV. of the Manual of the International List of Causes of Death, which should be consulted and followed in all cases of doubt.

Copies of this Manual were distributed to Medical Officers of Health in 1912 by the Registrar-General, and may be purchased either directly or through any bookseller from Wyman & Sons, Ltd., 29, Breans Buildings, Fetter Lane, E.C., price 1/-.

(a) All "Transferable Deaths" of residents, *i.e.*, of persons resident in the District who have died outside it, are to be *included* with the other deaths in columns 2-10. Transferable deaths of non-residents, *i.e.*, of persons resident elsewhere in England and Wales who have died in the District, are in like manner to be *excluded* from these columns. For the precise meaning of the term "transferable deaths" see footnote to Table I.

The total deaths in column 2 of Table III. should equal the figures for the year in column 12 of Table I.

(b) All deaths occurring in institutions for the sick and infirm situated within the district, whether of residents or of non-residents, are to be entered in the last column of Table III.

(c) All deaths certified by registered Medical Practitioners and all Inquest cases are to be classed as "Certified"; all other deaths are to be regarded as "Uncertified."

(d) Exclusive of "Tuberculous Meningitis" (10), but inclusive of Cerebro-spinal Meningitis.

(e) Title 19 should be used for deaths from Diarrhea and Enteritis at all ages. (In the "Short List" deaths from Diarrhea and Enteritis under 2 years are included under Title 19; those at 2 years and over being placed under Title 28.)

N.B.—Deaths of soldiers and sailors occurring in hospitals and institutions in the district are to be excluded from the total number of deaths registered in the district, and such deaths should in like manner be excluded from column 11 of Table III.

TABLE IV.

Bonne Rural { *Bonnie*
District.

Infant Mortality.

1915. Nett Deaths from stated causes at various Ages under 1 Year of Age.

(See Note (a) at Back.)

CAUSES OF DEATH.	Under 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 4 weeks.	6 months & under	9 months & under	12 months & under	Total Deaths under 1 year.
All causes { Certified.	7	/		8	4	2	2	5	21
Uncertified.									
{ Small-pox									
Chicken-pox									
Measles									
Scarlet fever									
Whooping-Cough ...									
Diphtheria and Croup ...									
Erysipelas									
Tuberculous Meningitis ...									
Abdominal Tuberculosis (b)									
Other Tuberculous Diseases									
Meningitis (<i>not Tuberculous</i>)									
Convulsions					2				4
Laryngitis					/				
Bronchitis					/				
Pneumonia (all forms) ...					/				
Diarrhoea					/				
Enteritis									
Gastritis									
Syphilis									
Rickets									
Suffocation, overlying ...									
Injury at birth ...									
Atelectasis					/				
Congenital Malformations (c)									
Premature birth ...					6				
Atrophy, Debility and									
Marasmus ...									
Other Causes ...									
Totals	7	/		8	4	2	2	5	21

Nett Births registered { legitimate 259
during the calendar year { illegitimate 22

NOTES TO TABLE IV.

- (a) The total in the last column of Table IV. should equal the total in column 10 of Table I, and in column 3 of Table III.
- (b) Under Abdominal Tuberculosis are to be included deaths from Tuberculous Peritonitis and Enteritis and from Tabes Mesenterica.
- (c) The total deaths from Congenital Malformations, Premature Birth, Atrophy, Debility and Marasmus, should equal the total in Table III., for ages under 1 year, under the heading Congenital Debility, and Malformation including Premature Birth.
Want of Breast Milk should be included under Atrophy and Debility.
- (d) For references to the meaning of any other headings, see notes attached to Table III.

In recording the facts under the various headings of Tables I., II., III. and IV., attention has been given to the notes on the Tables.

Seth Ganty Medical Officer of Health.

Date 19^a April 1916.